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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. 45745 First Inventor Bong-joo Kim et al. Title Pole Base Assembly Driving Device for Tape Recorder Express Mail Label No. U.S. PTO 22389 10/6 79380																																																																						
APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450																																																																						
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If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: </td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 5px;"> <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) </td> <td colspan="2" style="text-align: center; padding: 5px;"> of prior application No.: </td> </tr> <tr> <td colspan="4" style="padding: 5px;"> Prior application information: Examiner _____ Art Unit: _____ For CONTINUATION OF DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. 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Michel</td> <td>Registration No. (Attorney/Agent)</td> <td>46,300</td> </tr> <tr> <td>Signature</td> <td colspan="2"></td> <td>Date 10/7/2007</td> </tr> </table>				1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small>	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	2. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27.</small>	8. 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CORRESPONDENCE ADDRESS				<input type="checkbox"/> Customer Number: _____		OR <input type="checkbox"/> Correspondence address below		Name	Christian C. Michel			Address	Roylance, Abrams, Berdo & Goodman, L.L.P.			1300 19th Street, N.W., Suite 600			City	Washington	State	D.C.	Country		Telephone	(202) 659-9076	Name (Print/Type)	Christian C. Michel	Registration No. (Attorney/Agent)	46,300	Signature			Date 10/7/2007
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300703


FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 810.00)

Complete if Known

Application Number	
Filing Date	October 7, 2003
First Named Inventor	Bong-joo Kim et al.
Examiner Name	
Art Unit	
Attorney Docket No.	45745

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order Other None

 Deposit Account:

Deposit Account Number	18-2220
Deposit Account Name	Roylance, Abrams, Berdo

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1001 750	2001 375	Utility filing fee	770.00
1002 330	2002 165	Design filing fee	
1003 520	2003 260	Plant filing fee	
1004 750	2004 375	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1)		(\$)	770.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	15	-20** =	0	x	18	=	0.00	Extra Claims	Fee from below	Fee Paid
Independent Claims	2	- 3** =	0	x	86	=	0.00			
Multiple Dependent										

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1202 18	2202 9	Claims in excess of 20
1201 84	2201 42	Independent claims in excess of 3
1203 280	2203 140	Multiple dependent claim, if not paid
1204 84	2204 42	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)		(\$ 0.00)

**or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 410	2252 205	Extension for reply within second month	
1253 930	2253 465	Extension for reply within third month	
1254 1,450	2254 725	Extension for reply within fourth month	
1255 1,970	2255 985	Extension for reply within fifth month	
1401 320	2401 160	Notice of Appeal	
1402 320	2402 160	Filing a brief in support of an appeal	
1403 280	2403 140	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,300	2453 650	Petition to revive - unintentional	
1501 1,300	2501 650	Utility issue fee (or reissue)	
1502 470	2502 235	Design issue fee	
1503 630	2503 315	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	40.00
1809 750	2809 375	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 750	2810 375	For each additional invention to be examined (37 CFR 1.129(b))	
1801 750	2801 375	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	
Other fee (specify) _____			
*Reduced by Basic Filing Fee Paid		SUBTOTAL (3)	(\$ 40.00)

(Complete if applicable)

Name (Print/Type)	Christian C. Michel	Registration No. (Attorney/Agent)	46,300	Telephone (202) 659-9076
Signature		Date	Oct 7, 2003	

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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